

RECEIVED
FEDERAL ELECTION
COMMISSION
VERIFICATION

For Complainant:

I hereby verify that the statements made in the attached complaint are, upon information and belief, true. Sworn pursuant to 18 U.S.C. § 1001.

Full name of Complainant: Nathan Richard Murphy
OFFICE OF GENERAL
COUNSEL

Mailing address of Complainant: P.O. Box 110
Dillon, Colorado 80435

Email address of the complainant: _____

Phone number of the complainant: _____

Signature of Complainant: Nathan Murphy Date: 8/23/16

For Notary:

This complaint was subscribed and affirmed before me in the county of Summit,

in the state of Colorado, this 23rd (date) day of August (month), 2016 (year)

by Nathan Richard Murphy (print name of complainant) in

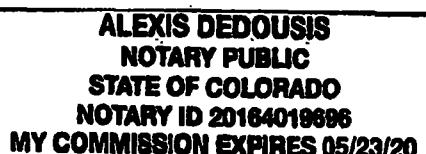
his/her free act and deed.

Alexis Dedousis
(Notary's Official Signature)

SEAL:

Alexis Dedousis
(Notary's Printed Name)

05/23/20
(Commission Expiration)



RECEIVED
FEDERAL ELECTION
COMMISSION

2016 AUG 25 PM 1:55

OFFICE OF GENERAL
COUNSEL

August 23rd, 2016

Office of the General Counsel
Federal Election Commission
999 E Street NW
Washington, DC 20463

To the Counsel:

COMPLAINT

I hereby bring this complaint, based upon information and belief, before the Federal Election Commission ("FEC") seeking an immediate investigation and enforcement action against Augustus Sol Invictus and the Committee to Elect Augustus Invictus for direct and serious violations if the Federal Election Campaign Act of 1971 ("FECA") and FEC regulations. The Committee to Elect Augustus Invictus, of which Augustus Invictus himself is the current treasurer, has not submitted quarterly reports for 2016 or their pre-primary report. In this report I have laid out all of the factual allegations and attached to this report documentation that have lead me to the conclusion that Augustus Invictus and the Committee to Elect Augustus Invictus have not adhered to the FECA and FEC regulation.

COMPLAINTAINT

I am a citizen of the United States and a registered voter. The FECA's reporting requirements that are administered by the FEC are in place so that citizens may review campaign finance activity. According to the FECA and FEC regulations, political committees must disclose contributors and disbursements in order for voters to be informed of who is providing candidates with financial support and how campaign funds

are being spent. Registered voters are entitled to receive information contained in reports of receipts and disbursements required by the FECA.

RESPONDENTS

Augustus Sol Invictus (hereafter "Invictus") is one of the Libertarian candidates currently running in the Florida senate primary.

The Committee to Elect Augustus Invictus ("CEAI") is the principle campaign committee for Invictus. Invictus himself is currently the treasurer of the CEAI.

FACTUAL ALLEGATIONS

- 1) According to a document received by the Secretary of the Senate on January 28th (Exhibit 1) the treasurer of the CEAI, Wesley Howell, resigned from his position on the committee as of January 1st, 2016.
- 2) On February 10th, 2016 an amended Statement of Organization (Exhibit 2) was received declaring that Invictus had assumed the role of treasurer as well as the custodian of records.
- 3) According to the Candidate Summary pages for Invictus (Exhibit 3) and the CEAI (Exhibit 4) on the FEC website, they have not filed the mandatory April and July quarterly reports for 2016 or the pre-primary report that was due by August 18th, 2016.
- 4) No reports have been filed by the CEAI since the year-end report for 2015 that was filed by Wesley Howell on January 16th, 2016 (Exhibit 5).

CONCLUSION

Often, the FECA-mandated reports of receipts and disbursements are the only source of information voters can use to determine if a candidate, political committee, or other entity is complying with the FECA. There are no quarterly reports or a pre-primary report currently available to the public or the voters of Florida because they have not been filed. It is in the best interest of the public that the information contained in these reports be available and accurate so voters can make informed decisions on election day.

I request that the FEC conduct an investigation into these allegations, declare the respondents to have violated the FECA and applicable FEC regulations, and impose sanctions appropriate to these violations and take such further action as may be appropriate, including referring this case to the Department of Justice for criminal prosecution of any violations.

Sincerely,

Nathan Murphy 8/23/16
Nathan Murphy

EXHIBIT 1



Wesley R. Howell, CPA RECEIVED
Lakeside Executive Suites SECRETARY OF THE SENATE
283 Cranes Roost Blvd., Suite 111 PUBLIC RECORDS
Altamonte Springs, Florida 32701 16 JAN 28 PM 4:32
(407) 515-1121
Whowell@cpa.com

January 18, 2016

Secretary of the Senate
Office of Public Records
PO Box 77578
Washington, DC 20013-7578

RE: Committee to Elect Augustus Invictus
C00578781

I hereby resign as the Treasurer for the above referenced campaign committee, effective
as of January 1, 2016.

Sincerely,

Wesley R. Howell
Wesley R Howell

2016012802000004126

FEC
FORM 1

STATEMENT OF
ORGANIZATION

FEC: INV
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 JAN 28 PM 4:32

Once Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

COMMITTEE TO ELECT AUGUSTUS INVICTUS

ADDRESS (number and street)

390 N ORANGE AVE
SUITE 2300
ORLANDO

(Check if address
is changed)

FL 32801

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

INFO@INVICTUSFORSENATE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

INVICTUSFORSENATE.COM

2. DATE **01/18/2015**

3. FEC IDENTIFICATION NUMBER **C00578781**

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **WESLEY R HOWELL CPA**

Signature of Treasurer 

Date

01/18/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only						For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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2016012802000004127

5. TYPE OF COMMITTEE**Candidate Committee:**

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation	LIB	Office Sought:	<input type="checkbox"/> House	<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> President	State	FL
						District	

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

AUGUSTUS INVICTUS							
-------------------	--	--	--	--	--	--	--

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- Corporation Corporation w/o Capital Stock Labor Organization
 Membership Organization Trade Association Cooperative
- In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- In addition, this committee is a Lobbyist/Registrant PAC.
 In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations; at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. FEC ID number
2. FEC ID number
3. FEC ID number
4. FEC ID number

2016012802000004128

Write or Type Committee Name

COMMITTEE TO ELECT AUGUSTUS INVICTUS

- 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

	CITY	STATE	ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

- 7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

AUGUSTUS INVICTUS

Mailing Address

390 N ORANGE AVE**SUITE 2300****ORLANDO****FL 32801**

Title or Position

CITY

STATE

ZIP CODE

TREASURERTelephone number **407-558-8899**

- 8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer**AUGUSTUS INVICTUS**

Mailing Address

390 N ORANGE AVE**SUITE 2300****ORLANDO****FL 32801**

Title or Position

CITY

STATE

ZIP CODE

TREASURERTelephone number **407-558-8899**

2016012802000004129

Full Name of
Designated
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

TRUSTCO BANK

Mailing Address

1295 TUSKAWILLA RD

WINTER SPRINGS

FL

32708

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

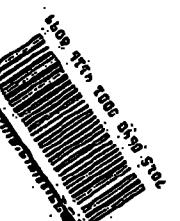
STATE

ZIP CODE

2016012802000004130

POST OFFICE
AT THE SITE
SCREENED

RECEIVED
INVESTIGATION
SECTION
FBI - NEW YORK



10/01/2000
FBI - NEW YORK

RE ADM.
SECRETAR

K. McCallum
PRIVAT-DET
MAIL CH/CT BUILDING
UNIT 217
WASH. D.C. 20510
O: 202/224-0227

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED 1-23-16

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE POSTMARK

FAX _____

Date of Receipt

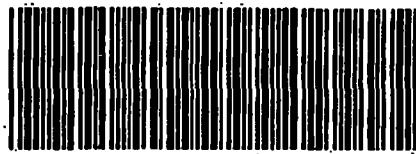
OTHER _____

Date of Receipt or Postmark

PREPARER DT DATE PREPARED 1-28-16

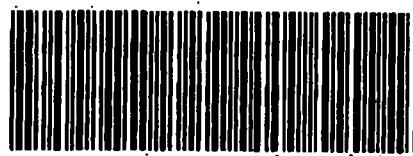
2/28/2015

2016012802000004132



SEN PATCH

201601280200004133



SEN PATCH

EXHIBIT 2

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
2016 FEB 10 PM 9:07
FEDERAL ELECTION COMMISSION

1 NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4MS
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COMMITTEE TO ELECT AUGUSTUS INVICTUS

ADDRESS (number and street) 776 N. ORANGE AVE. #5104

X (Check if address is changed)

ORLANDO STATE ▲ F L 3 2 8 0 1 ZIP CODE ▲

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

X (Check if address is changed)

INFO@INVICTUSFORSENATE.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.INVICTUSFORSENATE.COM

2. DATE 0 2 0 4 2 0 1 6

3. FEC IDENTIFICATION NUMBER ► C 00578781

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer AUGUSTUS SOL INVICTUS

Signature of Treasurer 

Date 0 2 0 4 2 0 1 6

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only						For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 06/2012)
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5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

L

Office Sought:

House

X

Senate

President

State

FL

District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C

2. _____ FEC ID number C

3. _____ FEC ID number C

4. _____ FEC ID number C

Write or Type Committee Name

COMMITTEE TO ELECT AUGUSTUS INVICTUS

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	A U G U S T U S I N V I C T U S .		
Mailing Address	776 N. ORANGE AVE. #5104		
	ORLANDO		
Title or Position	CITY	STATE	ZIP CODE
CUSTODIAN		Telephone number	407 - 558 - 8899

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	AUGUSTUS SOL INVICTUS .		
Mailing Address	776 N. ORANGE AVE. #5104		
	ORLANDO		
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number	407 - 558 - 8899

Full Name of
Designated
Agent

AUGUSTUS SOL INVICTUS

Mailing Address

776 N. ORANGE AVE. #5104

ORLANDO

CITY

F

L

32801

-

STATE

ZIP CODE

Title or Position

AGENT

Telephone number 407-558-8895

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

FIRST GREEN BANK

Mailing Address

1118 S. ORANGE AVE.

ORLANDO

CITY

F

L

32806

-

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

F

L

-

STATE

ZIP CODE

EXHIBIT 3

170444-1-572

EXHIBIT 4

1
7-0444-1-1474

EXHIBIT 5

FEC
FORM 3REPORT OF RECEIPTS
AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 JAN 28 PM 4:23

Office Use Only

1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.		12FE4MS
<u>Committee to Elect Augustus Tackett</u>				
ADDRESS (number and street) ▼ <input type="checkbox"/> Check if different than previously reported: (ACC)		1283 Gaines Road Blvd Suite 111 Baltimore Springs MD 21208-1		
		CITY ▲	STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATION NUMBER ▼		C00578787		
3. IS THIS REPORT		<input checked="" type="checkbox"/> NEW (N) OR	<input type="checkbox"/> AMENDED (A)	STATE ▽ DISTRICT MD
4. TYPE OF REPORT (Choose One)		(b) 12-Day PRE-Election Report for the:		
(a) Quarterly Reports:		<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> April 15 Quarterly Report (Q1)		<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	
<input type="checkbox"/> July 15 Quarterly Report (Q2)				
<input type="checkbox"/> October 15 Quarterly Report (Q3)				
<input checked="" type="checkbox"/> January 31 Year-End Report (YE)		Election on	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	In the State of <input type="checkbox"/>
(c) 30-Day POST-Election Report for the:		<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
<input type="checkbox"/> Termination Report (TER)		Election on	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	In the State of <input type="checkbox"/>
5. Covering Period		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 10/07/2015	through	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 12/31/2015
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer <u>Wesley R. Howell</u>				
Signature of Treasurer <u>Wesley R. Howell</u>		Date <input type="checkbox"/> <input type="checkbox"/> 12/31/2016		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.				
Office Use Only				

2016012802000004083

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Page 2

Write or Type Committee Name

Committee to Elect Augustus Invictus

Report Covering the Period: From:

7/31/2013

To:

7/31/2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))..	<u>1,068.62</u>	<u>3,762.06</u>
(b) Total Contribution Refunds (from Line 20(d)) ..	<u> </u>	<u> </u>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	<u>1,068.62</u>	<u>3,762.06</u>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)..	<u>988.77</u>	<u>2,364.98</u>
(b) Total Offsets to Operating Expenditures (from Line 14)...	<u> </u>	<u> </u>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	<u> </u>	<u> </u>
8. Cash on Hand at Close of Reporting Period (from Line 27)...	<u>397.08</u>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	<u> </u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	<u> </u>	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-8530
Local 202-694-1100

201601280200004084

FEB 2016

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Committee to Elect Augustus Invictus

Report Covering the Period: From:

10 01 2013

To:

12 31 2013

L RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	10,686.62	27,622.06
(i) Itemized (use Schedule A)		
(ii) Unitemized		
(iii) TOTAL of contributions from individuals		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs)		
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(ii), (b), (c), and (d))	10,686.62	27,622.06
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate...		
(b) All Other Loans...		
(c) TOTAL LOANS (add Lines 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	10,686.62	27,622.06

201601280200004085

FEB 2016

DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	7,887.77	23,649.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs)..		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (Add Lines 17, 18, 19(c), 20(d), and 21) ►	7,887.77	23,649.88

III. CASH SUMMARY

201601280200004086

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	3,173.3
24. TOTAL RECEIPTS THIS PERIOD (from Line 18, page 3)...	10,686.2
25. SUBTOTAL (add Line 23 and Line 24)...	13,858.5
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	7,887.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	3,972.8

FEBANG18

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE / OF /
 (check only one):
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of collecting contributions
 or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (in Full)

Carolina Hope to Elect Augustus Invictus

Full Name (Last, First, Middle Initial):

A. Desegurs Carolina

Mailing Address

8409 Twin Lakes Blvd
 City Tampa State FL Zip Code 33614

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt

11 06 2015

Amount of Each Receipt this Period

.200.00

Full Name (Last, First, Middle Initial):

B. De La Hyl Drew

Mailing Address

713 Orleans Trace
 City Peachtree City State GA Zip Code 30269

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt

11 06 2015

Amount of Each Receipt this Period

.60.00

Full Name (Last, First, Middle Initial):

C. Cowham Rynne

Mailing Address

436 W Willow St
 City Stockton State CA Zip Code 95203

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt

11 09 2015

Amount of Each Receipt this Period

.156.00

SUBTOTAL of Receipts This Page (optional)

416.00

TOTAL This Period (last page this line number only)

416.00

2016012802000004087

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:
 (check only one) **PAGE 1 OF 1**

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 18a	<input type="checkbox"/> 18b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions
 or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. *American Ad Specialist*
 Mailing Address *7075 Kingsport Parkway, #14*
 City *Orlando* State *FL* Zip Code *32819*
 Purpose of Disbursement *T-Shirts*
 Candidate Name *Augustus Invictus*
 Office Sought: House Senate President Disbursement For: Primary General
 State: *FL* District: Other (specify)

Date of Disbursement

11 10 2013

Amount of Each Disbursement this Period

3,821.2

B. *Enterprise Car Rental*
 Mailing Address *35 E Colonial Dr*
 City *Orlando* State *FL* Zip Code *32801*
 Purpose of Disbursement *Travel*
 Candidate Name *Augustus Invictus*
 Office Sought: House Senate President Disbursement For: Primary General
 State: *FL* District: Other (specify)

Date of Disbursement

12 01 2013

Amount of Each Disbursement this Period

2,347.9

C.
 Mailing Address
 City _____ State _____ Zip Code _____
 Purpose of Disbursement
 Candidate Name
 Office Sought: House Senate President Disbursement For: Primary General
 State: _____ District: _____

Date of Disbursement

MM DD YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) _____

6,169.1

TOTAL This Period (last page this line number only) _____

6,169.1

2016012802000004088

FESAN011

FEC Schedule B (Form 3) (Revised 02/2009)

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE <u> </u> OF <u> </u>
FOR LINE NUMBER: (check only one)	
<input type="checkbox"/> 13a <input type="checkbox"/> 13b	

NAME OF COMMITTEE (In Full)

LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:			
<i>N/A</i>	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u> </u>			
Mailing Address				
City	State	ZIP Code		
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
TERMS	Date incurred <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"> / <input type="text"/></input>	Date Due <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"> / <input type="text"/> <input type="text"/> / <input type="text"> / <input type="text"/></input></input>	Interest Rate <input type="text"/> % (epr)	Secured: <input type="checkbox"/> Yes <input type="checkbox"/> No
List All Endorsers or Guarantors (if any) to Loan Source				
1. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	<input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	<input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	<input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	<input type="text"/>
SUBTOTALS This Period This Page (optional)..... ► <input type="text"/>				
TOTALS This Period (last page in this line only)..... ► <input type="text"/>				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

FECAN010

FEC Schedule C (Form 3) (Revised 02/2003)

2016012802000004089

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20403

Supplementary for
 Information found on
 Page _____ of Schedule C

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER C	
LENDING INSTITUTION (LENDER) Full Name <i>N/A</i>		Amount of Loan <input type="text"/>	Interest Rate (APR) <input type="text"/> %
Mailing Address		Date Incurred or Established <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
City	State Zip Code	Date Due <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, date originally incurred <input type="text"/> <input type="text"/> <input type="text"/>	
B. If line of credit, Amount of this Draw: <input type="text"/>		Total Outstanding Balance: <input type="text"/>	
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers, and guarantors must be reported on Schedule C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? <input type="text"/>	Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <input type="text"/>	
A depository account must be established pursuant to 11 CFR 100.82(o)(2) and 100.142(o)(2). Location of account: Address: Date account established: <input type="text"/> / <input type="text"/> / <input type="text"/> City, State, Zip: _____			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name <input type="text"/> Signature <input type="text"/>		DATE <input type="text"/> / <input type="text"/> / <input type="text"/>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable creditworthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name <input type="text"/> Signature <input type="text"/>		DATE <input type="text"/> / <input type="text"/> / <input type="text"/>	

201601280200004090

FESAN018

FEC Schedule C-1 (Form 3) (Revised 02/2003)

**SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS**

Excluding Loans

NAME OF COMMITTEE

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans		(Use separate schedule(s) for each numbered line)	PAGE OF FOR LINE NUMBER: <input type="checkbox"/> 9 <input type="checkbox"/> 10
NAME OF COMMITTEE (in Full)			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>N/A</i>		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		
1) SUBTOTALS This Period This Page (optional) ..		▶	
2) TOTALS This Period (last page this line number only) ..		▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..		▶	
4) ADD 1) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		▶	

ESTATE

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
 (To Be Used By A Principal Campaign Committee)

N/A

Name of Principal Campaign Committee (In Full)		Report-Covering Period: From: <input type="text"/> / <input type="text"/> / <input type="text"/> To: <input type="text"/> / <input type="text"/> / <input type="text"/>																																																																																										
<table border="1"> <thead> <tr> <th colspan="2">Committee Name</th> <th>(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees</th> <th>(b) Line No. 11(b) Total Contributions From Political Party Committees</th> </tr> </thead> <tbody> <tr> <td>A</td> <td></td> <td></td> <td></td> </tr> <tr> <td>B</td> <td>Column Total Last Page Only:</td> <td></td> <td></td> </tr> <tr> <td></td> <td>(c) Line No. 11(c) Total Contributions From Other Political Committees</td> <td>(d) Line No. 11(d) Total Contributions From The Candidate</td> <td>(e) Line No. 11(e) Total Contributions</td> <td>(f) Line No. 12 Total Transfers From Other Authorized Committees</td> <td>(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate</td> <td>(h) Line No. 13(b) Total All Other Loans</td> </tr> <tr> <td>A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>B</td> <td>(i) Line No. 13(c) Total Loans</td> <td>(j) Line No. 14 Total Officials to Operating Expenditures</td> <td>(k) Line No. 15 Total Other Receipts</td> <td>(l) Line No. 16 Total Receipts</td> <td>(m) Line No. 17 Total Operating Expenditures</td> <td>(n) Line No. 18 Total Transfers to Other Authorized Committees</td> </tr> <tr> <td>A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>B</td> <td>(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate</td> <td>(p) Line No. 19(b) Total Loan Repayments of All Other Loans</td> <td>(q) Line No. 19(c) Total Loan Repayments</td> <td>(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons</td> <td>(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees</td> <td>(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees</td> </tr> <tr> <td>A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>B</td> <td>(u) Line No. 20(d) Total Contribution Refunds</td> <td>(v) Line No. 21 Total Other Disbursements</td> <td>(w) Line No. 22 Total Disbursements</td> <td>(x) Line No. 23 Cash on Hand Beginning of Reporting Period</td> <td>(y) Line No. 27 Cash on Hand Close of Reporting Period</td> <td>(z) Line No. 9 Debts & Obligations Owed TO the Committee</td> </tr> <tr> <td>A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>B</td> <td>(aa) Line No. 10 Debts & Obligations Owed BY the Committee</td> <td>(bb) Line No. 6(c) Net Contributions</td> <td>(cc) Line No. 7(c) Net Operating Expenditures</td> <td></td> <td></td> <td></td> </tr> <tr> <td>A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>B</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	A				B	Column Total Last Page Only:				(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans	A							B	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Officials to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees	A							B	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees	A							B	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee	A							B	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures				A							B						
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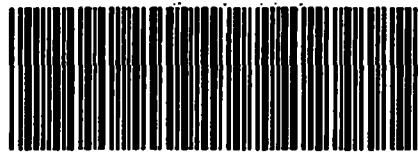
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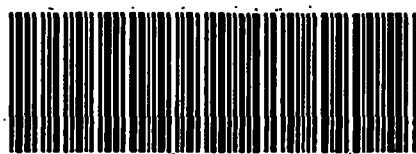
Secretary of the Senate
Office of Public Records

P.O. Box 77578
Washington DC 20013-7578



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